



# The Journal

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## Simulation Center Enhances Medical Education throughout Region

By Bernard S. Little  
WRNMMC Journal  
staff writer

Approximately 30 fellows from medical training programs at Walter Reed National Military Medical Center (WRNMMC), Washington Hospital Center, George Washington University, Georgetown University, and University of Maryland recently completed a three-week block of instruction, with hands-on training in WRNMMC's simulation training center (SIM).

Participants in the D.C. Baltimore Pulmonary/Critical Care Fellows Summer Education Block, a joint educational venture between the programs, completed the training on July 9, but not before sharpening their skills in the state-of-the-art SIM.

The location of the medical training for the first-year fellows is spread among the participating institutions, explained Maj. (Dr.) Chad Cryer, assistant chief of De-

partment of Simulation at WRNMMC. "It's designed to provide fellows with a solid knowledge base and initial procedural skills set from which to start their clinical training."

The SIM gives fellows hands on training in airway management, chest tube insertions, bronchoscopy and hemoptysis management, as well as management of intra-aortic balloon pumps.

"The [SIM] hosted a two-day critical care ultrasound course for the same group of learners," Cryer added. He explained the training focused on critical care ultrasonography for shock, trauma, cardiac and lung imaging, and procedures such as thoracentesis, central venous catheter placement, and diagnosing deep venous thrombosis. "All of these make [providers] more effective caregivers for our critically ill patients," the major said.

"Simulation training is essential for improving both

clinical and technical skills, particularly those that focus on life threatening situations," said Army Capt. (Dr.) Patrick Smith, a critical care fellow who completed the training. "The education that we received during the recent D.C. Baltimore Pulmonary/Critical Care Medicine Summer Education Block was exceptional in achieving this objective, and provided a solid foundation that will be added upon during the next three years at WRNMMC."

Navy Lt. (Dr.) Nikunj Bhatt, also a critical care fellow at WRNMMC, agreed.

"I thought it was a great experience that helped develop strong foundations and key skill sets for the upcoming three years in pulmonary and critical care medicine," Bhatt said. "The readings, simulations, and exam were challenging and thought-provoking, giving us a glimpse of our future careers. It was also great to

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Photo by Walter Reed National Military Medical Center Simulation Training Center

**Cmdr. (Dr.) Anthony Nations of the pulmonary/critical care departments demonstrates insertion of a small chest tube on a training mannequin in the Walter Reed National Military Medical Center Simulation Training Center.**

## USU Students Save Man's Life After Car Crash In Sam's Club

By Ryan Hunter  
NSAB Public Affairs  
staff writer

2nd Lt. Wells Weymouth and Ensign John Hunt were on the scene at the Sam's Club in Bethesda when a car barreled through the front of the store July 24.

While picking up supplies for their classes at the Uniformed Services University of Health Sciences (USU), Weymouth and Hunt heard "a huge explosion," said Hunt. "We turned and there's a car running through Sam's Club at 20-30 miles per hour. There were some screams. Wells and I took it upon ourselves and ran over to see what was going on."

Montgomery County authorities still aren't certain why Subinoy Mazumdar, 77, lost control of his vehicle and slammed into the front fire escape, part of a brick wall and a food court area of the store. One victim, Sheila R. Orellana, 31, was struck in the parking lot after moving her two children out of the way of the vehicle. Mazumdar was not injured and Orellana suffered only minor injuries, however three others were injured inside of the store, including Dimas M. Chavez, 76, who suffered severe leg trauma.

"The guy's leg was almost severed completely off. It was bleeding profusely," said Hunt.

What Hunt and Weymouth did next may have saved

Chavez's life.

Having completed their first year of military medical school at USU, the two were trained in emergency medical procedures in high stress battlefield environments. They had just purchased hot dogs to use in a class later that day as props for wound cleaning practice, minutes before seeing Chavez.

"We started applying direct pressure to one of the wounds. It was the first thing we learned to do with our classes," explained Hunt. "We kept pressure on it until it stopped bleeding."

While tending to Chavez, Weymouth and Hunt assessed and aided other injured shop-



Photo provided by USU Public Affairs

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**Ensign John Hunt, left, and 2nd Lt. Wells Weymouth.**



# Chaplain's Corner

## "The Best Is Yet To Come"

This is a phrase that many people have heard throughout messages preached on television and other venues. However, the questions is how many people believe in what this phrase says?

I believe it requires us to have a positive attitude in our lives in order to see this happen. Life has many challenges but we can have the fortitude to overcome the circumstances that enter our lives. I realize it is not always easy to overcome and excel but it is possible. Having a positive attitude directs our thoughts, feelings, and actions in a positive manner. It also allows us to be "happy," meaning, we can be assured even in the midst of chaos that God is with us and will remain with us as we walk through the valleys of doubt and despair.

Most religions throughout history have held the belief that there is something beyond this life, that the best is yet to come. Our frail bodies will not always be well but our spiritual health can maintain us. Our minds may not always be sound but our spiritual health can sustain us and be



the resource that enables us to be at peace even when chaos is all around us.

In the song "The Best Is Yet To Come" a singer by the name of Donald Lawrence wrote these words.

"Hold on my brother don't give up

Hold on my sister just look up

There is a master plan in store for you

If you just make it through God's gonna really blow your mind

He's gonna make it worth your time

For all of the trouble you've been through

The best seems double just for you

The best is yet to come The best is yet to come."

The best is yet to come for you. There are challenges, concerns, and problems that we must face but we can face them with a positive attitude today, knowing that the best is yet to come because our strength is in God.

**Chaplain (Maj.)  
Denise A. Hagler  
Staff Chaplain Clinician  
Walter Reed National  
Military Medical Center**

# Bethesda Notebook

## Nutrition for Cancer Prevention, Survival

Dr. Neal Barnard, clinical researcher and one of America's leading advocates for health and nutrition, will be the guest speaker at the Walter Reed Bethesda Prostate Cancer Support Group's quarterly meeting today at 7 p.m. in the America Building, second floor, Rm. 2525. Barnard will discuss "Nutrition for Cancer Prevention and Survival." For those wanting to attend the program without a military ID, call the Prostate Cancer Center at 301-319-2900 for base access. For more information, contact retired Col. Jane Hudak at 301-319-2918 or jane.li.hudak.ctr@health.mil or Vin McDonald at 703-643-2658 or vpmjam@aol.com.

## Wounded Warriors Town Hall

A joint town hall meeting for recovering warriors and their families with commanders of Joint Task Force National Capital Region, Medical and Naval Support Activity Bethesda will be Aug. 8 in Building 62's Warrior Café at 2:30 p.m. The commanders will discuss information and hear any concerns warriors and their family members may wish to discuss.

## DAISY Award Ceremony

The next quarterly DAISY ceremony will be held Aug. 15 at 10 a.m. in Memorial Auditorium. For more information, call Christina Ferguson at 301-319-4148, or Joan Loepker-Duncan 301-319-4617.

## Pharmacy Hours

The Walter Reed National Military Medical Center (WRNMMC) Pharmacies are no longer open on Saturdays. The Arrowhead Pharmacy's hours are Monday through Friday, 8 a.m. to 7 p.m., and the America Pharmacy's hours are Monday through Friday, 7 a.m. to 6 p.m. The Drive-thru Refill Pickup Point is open Monday through Friday, 8 a.m. to 6 p.m. The Pharmacy will continue to provide 24/7 support for the Emergency Room and for all hospitalized patients. For questions about Pharmacy Services, call the Pharmacy Call Center at 301-295-2123.

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# August 1 Marks Start of National Minority Donor Awareness Week

By Sharon Renee Taylor  
WRNMMC Journal  
staff writer

There are approximately 119,000 individuals awaiting a life-saving organ transplant, according to the U.S. Department of Health and Human Services (HHS). In the U.S., 18 people die every day due to the lack of available organs for transplant as the wait list continues to grow.

People of all ages, races and ethnicities can save and enhance lives by donating their organs, eyes and tissues, according to the HHS. Observed during the first week of August, National Minority Donor Awareness Week calls attention to the urgent need for registered organ, eye and tissues donors from minority populations.

National Minority Donor Awareness Week is a time to thank organ, eye, and tissue donors from all backgrounds — for the lives they have saved, according to Lt. Col. (Dr.) Shane Ottman, chief of the transplant service at Walter Reed National Military Medical Center (WRNMMC).

“Every 11 minutes, another name is added to the national transplant waiting list,” explained John Ogden, the public affairs and community education manager



Courtesy photo

**From left, living donor Sonja Gomez, her father Rev. Lorin Rhaney, and his wife Rev. Donna J. Rhaney, share a moment in 2009 after surgeons transplanted her kidney in her dad, a retired Marine sergeant major. Gomez encourages other minorities to consider live organ donation.**

for the Washington Regional Transplant Consortium (WRTC).

The organ most desperately needed is kidneys, Ogden said. 96,806 individuals need kidney transplants but only 45 percent of adults have registered as organ, eye and tissue donors, he said. One donor can save up to eight lives and enhance the lives of many more.

“Organ donation is most

desperately needed among African Americans — while they make up roughly 12 percent of the United States population, African Americans make up nearly 30 percent of the national waiting list for a transplant,” Ogden said.

According to the Organ Procurement and Transplantation Network, 35,212 African Americans wait on a kidney transplant list while

21,745 waiting are Hispanic/Latino; 7,939 Asian; 1,215 American Indian/Alaska Native; 585 Pacific Islander and 560 multiracial.

“We obviously need more donors in general and need to encourage all groups to donate,” Ottman said.

According to HHS, African Americans, Asian Americans and Pacific Islanders, as well as Hispanics/Latinos are three times more likely

than Caucasians to suffer from end-stage renal (kidney) disease, often as the result of high blood pressure and other conditions that can damage the kidneys.

There are several myths that prevent individuals from donating organs to others. Mistrust of doctors and nurses is “the biggest myth that we face,” Ogden ex-

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## Hagel, Winnefeld Honor Korean War Vets, Those Still Serving There

By Jim Garamone  
American Forces  
Press Service

Defense Secretary Chuck Hagel and Navy Adm. James Winnefeld remembered the Korean War as the first time the world united under the banner of the United Nations to stand up to aggression and support the rule of law.

The men spoke Saturday at a ceremony in Washington D.C., marking the 60th anniversary of the armistice ending active combat on the Korean peninsula.

More than 1.7 million Americans served in Korea during the 1950-1953 war.

A total of 36,574 Americans were killed.

“We stood with our fellow citizens of the world, even though they lived on the other side of it,” Hagel said during the ceremony. “And we did not do it alone.”

Today, one of America’s closest allies is the Republic of Korea. All told, 22 countries fought aggression under the banner of the United Nations.

“The Korean War teaches us an important lesson — that alliances and international institutions are extensions of our influence, not constraints on our power,” Hagel said. “And they are critical to our long-term vision of peace and stability,

especially in the Asia-Pacific.”

The American, Korean and allied sacrifices were not in vain. The war in Korea began an unprecedented era of growth, security and prosperity in Asia, and that was made possible by America’s leadership, Hagel said.

“To sustain this security and prosperity in the 21st century, the United States is strengthening its economic, diplomatic, cultural, and security ties with countries throughout Asia,” Hagel said.

But the bedrock alliance remains Korea. The United States still maintains 28,500 U.S. service members in South Korea. “Just as

veterans of the Korean War held the line from Pusan to Panmunjom, so too do these current-day defenders stand ready to help guard freedom — and to promote peace and prosperity on the Korean Peninsula and throughout East Asia,” the secretary said.

Winnefeld, vice chairman of the Joint Chiefs of Staff, said the anniversary honors the legacy of the millions of American service members who served in the Korean War.

“For many of us it’s personal — a parent, a brother, a relative, a friend who served far from our shores,” the admiral said. “And I’m no exception — my own father,

as a young Navy ensign, served with honor alongside the more than 36,000 heroic Americans who gave the last full measure of devotion to this war.”

The sacrifice of those Americans cemented the U.S.-Republic of Korea alliance, and serves as an inspiration to the newest generation to defend the peninsula. All allied forces in South Korea know the motto Katchi Kapshida, or “We Go Together,” Winnefeld said. “For them, for every warrior who served before them, and for those who are serving today in harm’s way, we will always remember,” he said.



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# Spinal Cord Stimulation Gives Vets Quality of Life

By Sarah Marshall  
WRNMMC Journal  
staff writer

Master Sgt. Michael Trost was in South Eastern Afghanistan in February 2012 as part of the Army Civil Affairs, when he was shot five times by a machine gun, leaving him with a severed sciatic nerve, and not to mention what he describes as the "most horrific pain."

"It felt like someone was taking a sledge hammer and just smashing my right foot," Trost said, explaining the chronic pain that developed later on in his recovery. "I would have this horrible sciatic nerve pain that would put me on the floor ... It would literally drive me almost insane. It's electric, fiery, relentless pain."

Since his injury, the active duty Soldier with more than 30 years of service under his belt, has gained a greater sense of normalcy, which he largely attributes to an emerging technology used at Walter Reed Bethesda, known as spinal cord stimulation.

The technology uses electrical signaling, similar to that of a pacemaker, explained Maj. (Dr.) David Jamison, an anesthesiologist at Walter Reed Bethesda. Smaller than the size of a business card, the stimulator is surgically implanted in the patient's back. Thin wires, or leads, stem from the device, and are threaded through the spine, much like an epidural, Jamison said. The device is then programmed wirelessly and controlled externally to send electrical pulses through the spinal cord, emitting signals to the brain that cancel out the pain signals, he said.

Though spinal cord



Courtesy photo

**Sgt. Timmothy Garrigus, left and Cpt. David Christopher, right, check out a walking stick presented to Master Sgt. Mike Trost (center) during a team build for the Trost Family on June 9, 2012 at his home in Tennessee.**

stimulation has been used by doctors nationwide for about the last three decades, it has proven beneficial to those returning from combat with chronic pain since the wars in Afghanistan and Iraq, Jamison said. He estimates about five service members undergo the surgery each month, and he hopes to spread the word about the technology, as it continues to develop and allow wounded warriors to regain their quality of life.

For Trost, spinal cord stimulation meant being off pain medications, being better able to walk, and take a pain-free car ride. The vibrations would trigger his sciatic nerve pain, he said.

Trost noted the progress he's made since he arrived at Walter Reed Bethesda after being injured last year. Having also lost his right thumb and forefinger, the master sergeant who now lives in Tennessee, said he did not have use of his right leg, from the knee down to his toe. Later on in his healing process, after re-learning how to walk, he began to experience excruciat-

ing pain caused by the severed sciatic nerve, the largest nerve in the body that runs from the spinal cord to the feet. He was on methadone for several months, but that did not completely take away the pain, he said. His doctors suggested spinal cord stimulation, and he decided to give it a try.

"It improved the quality of my life. It took away about 95 percent of the sciatic nerve pain," Trost said.

The procedure has also been known to help improve blood flow, Jamison added, especially for those with circulatory conditions, as it dilates blood vessels in the process of stimulating nerves. Additionally, the device can be removed years later, if necessary, with minimal scarring and without leaving behind any hardware or screws, he added.

Patients also have the option to test the spinal cord stimulator first, before opting to have it surgically implanted, Jamison noted. They first undergo a four to five day trial period, with the device

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# Five Safety Tips to Avoid Animal Collisions

By Ryan Hunter  
NSAB Public Affairs  
staff writer

Although deer are more active during their fall mating season, full grown bucks can be seen near Walter Reed National Military Medical Center all year round, posing a serious threat to drivers. “You’ll see them mostly over by the Fisher Houses, the child care center, behind the university and in the main fields out front,” explained Naval Support Activity Bethesda Safety Manager Jim Gantz.

The following are a few useful tips to avoid vehicular collision and minimize damage with the furry residents of the base.

1. Drive cautiously. The best thing you can do to avoid a collision with an animal is to follow the rules of the

road, said Gantz. Obeying the posted speed limits, wearing a seat-belt and driving without distraction greatly reduce your risk of collision and injury in any situation. Gantz added, “Most people on the installation are driving slow and safe enough that they can react, but it’s when you’re going at highway speeds that a deer can come at you so fast that you don’t have time to react.”

2. Understand deer behavior. According to the University of North Carolina’s Highway Safety Research Center, deer rarely travel alone. When going from one place to another, they usually walk in groups of three or more in single file lines and frequent wooded areas or fields where they are harder to see. These factors make it nearly impossible to determine the

number of deer in a group at first glance. If a single deer passes on the road in front of you it’s best to assume others are following even if they’re out of sight.

3. Approach deer cautiously. If you see a deer standing by the side of the road it probably isn’t waiting for you to drive past. Deer move impulsively and may dart in front of your car at the last moment. The Insurance Institute for Highway Safety (IIHS) recommends slowing to a controlled stop and waiting for animals to move out of the way.

4. Do not veer away. According to Anne McCart, the senior vice president for research at IIHS, “A majority of the people killed [in collisions involving large animals] weren’t killed by contact with the animal.” Swerving suddenly and errati-



Photo by Jeremy K. Johnson

**A young doe nibbles on the bushes in the courtyard at the Uniformed Services University of the Health Sciences.**

cally to avoid hitting a deer could result in a collision with a tree or other vehicle which greatly increases your chances of injury.

5. Avoid coming into contact with injured

animals in the road. “[A deer] doesn’t know that a person coming out of their car is trying to help. They just see an attack,” said Gantz. “Stay away from them.” If you see

an animal injured or dead on the road, call a security dispatch operator at 295-1426. If you or someone else is injured by an animal, call emergency services on base at 777 or 911.

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# Museum Bridges Gap between Medicine of the Past and Medicine of the Future

**By Mass Communication Specialist 2nd Class John K. Hamilton**  
NSAB Public Affairs staff writer

Just a short drive from Naval Support Activity Bethesda rests the National Museum of Health and Medicine (NMHM), a Department of Defense museum that is dedicated to the preservation and care of the nation's involvement and interest in military medicine, from the time of the Civil War to the present day.

"Our mission is to inspire an interest and understanding in the history of general American medicine but with a very special focus on American military medicine," said Tim Clarke, deputy director of communica-

tions at NMHM. "Our hope is to convince our visitors that medicine is important to the military and that military medicine is important to the nation."

Situated next to the Forest Glen Annex in its new home at 2500 Linden Lane, Silver Spring, Md., since the merger of Walter Reed Army Medical Center (WRMAC) and the National Naval Medical Center, the museum continues to serve the patient and caregiver population of Walter Reed National Military Medical Center, as it did in the past.

"We were fortunate in our previous location to be on the campus with WRMAC in its previous incarnation and had a very active and dynamic relationship with the research and clinical staff there



Photo by Mass Communication Specialist 2nd Class John K. Hamilton

**The Brooks family enjoys a self-guided tour of the National Museum of Health and Medicine, taking their time as they walk through the four exhibition halls Monday.**

who worked with the museum so we could collect objects and add them to the collection,"

said Clarke. "We also had an active and dynamic relationship with the patient and

caregiver population, so that we could offer programs and exhibits specific to that au-

dience while we were still on the old campus.

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# Navy Gives Public Summer Access to Naval Museums

**From Naval History and Heritage Command**

The National Museum of the United States Navy, Cold War Gallery and Display Ship Barry will be accessible through a new gate open to the public starting Aug. 1.

For the month of August, Naval History and Heritage Command along with the support of Naval District Washington, will offer free public access via the Anacostia Riverwalk Trail to the newly opened Cold War Gallery, the National Museum of the U.S. Navy and Display Ship Barry.

The only day the museums will not be open is on Mondays, due to the furlough restrictions.

Until this point, it has been a challenge for visitors to access these national treasures due to security requirements. However, a special agreement

was reached to make a family-friendly option for museum goers, located within a 15-minute walk of the National Park.

"We are very excited about the possibility of introducing even more of our neighbors to the rich history of the U.S. Navy," said Capt. Jerry Hendrix, the director of the Naval History and Heritage Command, which is responsible for the U.S. Navy's museums.

"There is something for everyone, from young children to our senior veterans."

Signs placed along the Riverwalk will direct visitors to the Washington Navy Yard gate located near the Cold War Gallery. All adult visitors are required to present photo identification to enter. With the exception of Mondays, the museums and display ship will be open to visitors 9 a.m. - 5 p.m. weekdays and 10 a.m. - 5 p.m. on weekends.

Located at the Washington Navy Yard, the National Museum of the U.S. Navy displays art and artifacts from the Revolutionary War, Antarctic exploration, World War I and World War II, as well as submarine innovations. Visitors will enjoy peering through a submarine periscope, learning about deep sea exploration and diving, and maneuvering WWII-era artifacts. The Cold War Gallery, opened in October, displays a large submarine section, including a view of living and working conditions, artifacts from Vietnam POWs, displays from the Korean War, as well as an interactive exhibit called the "Lion's Den."

Display Ship Barry is one of only three remaining Forrest Sherman class destroyers. Barry is the third ship to bear the name of the illustrious Revolutionary War naval hero, Commodore John Bar-

ry. The ship supported the 1958 Marine and Army airborne unit landing in Beirut, Lebanon. In 1962, she was a member of the task force that quarantined Cuba during the Cuban Missile Crisis in response to evidence that Soviet missiles had been installed on the island. In 1979, Barry joined the Middle East Force for Persian Gulf service during the very tense period that accompanied the Iranian Revolution. In 1981-1982 Barry made her final deployment in that area. USS Barry was decommissioned in 1982 and arrived at the Washington Navy Yard in 1983.

For more information, visit the National Museum of the United States Navy website at [www.history.navy.mil/branches/org8-1.htm](http://www.history.navy.mil/branches/org8-1.htm).

For more news from Naval History and Heritage Command, visit [www.navy.mil/local/navhist/](http://www.navy.mil/local/navhist/).



Official U.S. Navy file photo

**Master Chief Petty Officer of the Navy Michael D. Stevens visits the Naval History and Heritage Command (NHHC) at the Washington Navy Yard for a guided tour with Capt. Henry J. Hendrix, director of NHHC. Stevens toured the National Museum of the United States Navy, the museum's Cold War Gallery Annex and the Historic Small Arms and Ordnance Vault.**



# Information, Tickets and Travel Sells More Than Just Tickets

By Mass Communication  
Specialist 3rd Class  
Brandon Williams-Church  
NSAB Public Affairs  
staff writer

It is well known that the Morale Welfare and Recreation (MWR) division's Information Tickets and Travel (ITT) office makes their primary profit selling discounted movie tickets, sporting events and amusement park admissions.

What ITT is lesser known for is providing discounted military rates for travel packages, cruise vacations and hotel and car rentals.

"We do worldwide services," said Recreation Specialist Sahara Henry. "Depending on where you want to go for travel, we can send you. If you have a general idea of when you want to go or a certain destination we can work with you and work out specifics so we can get you the best deal. We always try to get you a military discount if it is available, but even if it's not at that rate we can book it."

These services provided through ITT are not just prohibited to active duty military either.

"We can work with civilians and contractors, but a lot of the military discounts are strictly for active duty or retired military," said Henry. "If they have any other discounts like for the American Automobile Association (AAA) or the American Association of Retired Persons (AARP), we can always get those discounts for them as well."

ITT is also a great resource for getting the family ready for a vacation to exotic destinations.

"In terms of travel, all we do is leisure trips," said Alecia Pityk, ITT manager. "It's all custom-fitted to the customers. We don't have set dates and trips that you can sign up for. It's whatever the customer wants, so we try to work for them and accommodate their needs. For



Photo by Mass Communication Specialist 3rd Class Brandon Williams-Church

**Patrons of Morale, Welfare and Recreation enjoy some free time in the Information Tickets and Travel office located in Building 2 near Main Street at Walter Reed Bethesda.**

travel packages, you do have to depart from the U.S. Vacation packages for international travel consist of a flight with a hotel, but if it's within the U.S. we can either do flight and a hotel or flight and a car. The packages have to be round trip."

If the family needs to get away from the rigors of work or school ITT has cruise packages as well.

"For cruising, we deal with all of the major [travel providers], such as Royal Caribbean, Carnival and Disney," said Henry. "They all offer military discounts. It depends on the sailing and whether or not they offer the discounts so we try to work with their dates and find one that does offer a discount. Our cruises

are primarily to the Bahamas and Caribbean because of our location, but we can also do South America, Europe and Hawaiian destinations. We do a lot of cruises, so no matter where you want to go we can find the cruise for you."

ITT also gets discounted rates for car rentals through The Hertz Corporation for the rental by itself, said Henry. Patrons get a discounted rate of 15 percent with no upfront charges. If you want to rent a car as a part of a packaged deal with either hotel or air, there are other rental company options like with Dollar Car Rentals or most other leasing companies at the airports.

ITT lists some of these services

in the MWR Happenings Newsletter distributed every month.

For those families looking for the perfect place to relax and enjoy some free time, just stop by the ITT office and look at the possibilities, said Pityk. These services are available all the time and ITT will be happy to help you get to your dream destination.

Henry added, "we work in a stressful environment and taking that time for yourself is important."

For more information on vacation packages and car rental discounts, contact the ITT office at 301-295 0434 or visit [http://www.cnmc.navy.mil/regions/ndw/installations/nsa\\_bethesda/ffr/things\\_to\\_do/tickets\\_travel\\_and\\_tours.html](http://www.cnmc.navy.mil/regions/ndw/installations/nsa_bethesda/ffr/things_to_do/tickets_travel_and_tours.html).

## SIMULATION

Continued from 1

work with the other programs in the D.C.-Baltimore area and to visit their respective institutions," the lieutenant added.

"Simulation has a rich military heritage, initially beginning in aviation and subsequently extending to medicine," explained Lt. Col. (Dr.) Jeffrey Mikita, chief of the Department of Simulation at WRNMMC. "Medical simulation is a diverse, but specialized form of education and training targeted at optimizing health-care delivery. Its use for patient safety and education programs is recognized as a 'best practice' by

numerous health-care organizations and is mandated in the specialty training of many health-care providers. The National Capital Area has been a leader in medical simulation for more than a decade, and WRNMMC is well situated to advance this tradition."

Walter Reed Bethesda leadership cut the ribbon on its simulation center in January, opening the more than 5,000-square-foot facility in Building 3, fourth floor. The center moves training away from the patient population while retaining all of the technology and protocols of real operating and exam rooms.

In addition to the eight exam rooms, three conference rooms, a skills laboratory, and fully-outfitted OR, ER/ICU, the SIM houses a state-of-the-art audio-visual system

and numerous task training instruments.

The wireless, high-fidelity patient simulators, or mannequins, are the "stars" of the SIM, having the capability to speak, blink, sweat, bleed, suffer heartaches, stop breathing and give birth.

In addition to the medical fellows, younger future health-care providers have also gained clinical experience using the SIM. High school students interested in medical careers, participants in Thomas Edison High School of Technology's Medical Careers program, were able to become familiar with medical technology using the SIM to develop clinical and OR skills.

Mikita explained the SIM has also helped stand up a number of different medical programs at Walter

Reed Bethesda with staff members training in the center.

Army Col. (Dr.) Michael Nelson, deputy commander for Education, Training and Research at WRNMMC, said those individuals who will most benefit from the SIM, are "our beloved beneficiaries and patients," as health care providers gain confidence and a firm foundation in surgical techniques, hand-to-eye coordination, repetitive skills exercises, bedside manner and other clinical skills, before they pick up a scalpel to operate or examine a real patient.

To schedule a training session in the SIM, email Bonnie Teague at [bonnie.j.teague.ctr@health.mil](mailto:bonnie.j.teague.ctr@health.mil), or Mark John Wyn at [mark.j.wyn.civ@health.mil](mailto:mark.j.wyn.civ@health.mil).

DONOR

Continued from 3

plained. Those who don't donate sometimes believe doctors will let them die on the table to take their organs, he said. "Doctors and nurses are first and foremost trying to save your life," said the community education manager. Ottman agreed.

"Our goal is to help as many people as possible and increasing the donor pool would be one way to do this," the transplant surgeon said.

Another organ donation myth is tied to the subject of religion, said retired Marine Sgt. Maj. Lorin Rhaney, 65, a licensed minister and kidney transplant recipient, who is African American.

"They believe if you give an organ, you can't get into heaven because you're not going whole, and of course that's not true," said Rhaney. "Donating an organ can be a blessing to someone else but also to yourself, in the fact that you've given something that will give life, or prolong the life of someone else who's not as fortunate. Education is the key to that. We need to make the opportunity to get out and talk to one

another and get the true story of organ donation to all people, but especially minorities."

Diagnosed with renal cancer, doctors removed Rhaney's left kidney. With his remaining kidney operating below 3 percent, the retired Marine underwent dialysis three times a week for four hours a day for about a year. He needed a transplant. His daughter, Sonja Gomez, 43, the mother of two in Colorado, called her dad and offered him one of hers.

"Initially I felt overwhelmed because it is a sacrifice but it also made me feel really loved," Rhaney said.

In September 2009, transplant surgeons at the former Walter Reed Army Medical Center (WRAMC) performed the donor-recipient surgeries.

"The transplant kidney is working beautifully, no issues," he said. "We named our kidneys, S1 and S2. Hers is S1, mine is S2. I must've thanked her 8 million times, and I still do."

Gomez said she was grateful for the opportunity to help her dad. Twelve years earlier, after a move from California in 1997, she registered to become an organ donor when she renewed her driver's license.

With a multi-racial heritage of French, Irish, English, African

American and Sioux Indian, Gomez encourages other minorities to consider live organ donation.

"We push the [idea] of donation when we die, but we never talk about live donors," Gomez said. "There are so many people that need a kidney, and we can function off of one kidney. We can function off a certain percentage of our kidney and be a healthy person."

She said her dad wouldn't have even thought to ask one of his children to donate. "I didn't give him a chance ... I just came out and said, 'Let me do it.'" Gomez said doctors ran many tests to determine she would be able to donate a kidney to her father.

Her recommendation to individuals in need of an organ donation: ask your relatives, ask your friends, ask everyone you know to register to become an organ donor.

Ogden said you can register to become an organ donor when you renew your driver's license, or online through a state registry. Go to [www.organdonor.gov](http://www.organdonor.gov) to find one. If you're interested in helping with minority outreach efforts in the District of Columbia, Md. or Va., contact WRTC at 703-641-0100.

SPINAL

Continued from 4

temporarily sutured to the skin and secured with a bandage. During this time, he said they can take into account whether their pain decreases, and if it improves their overall function – whether they can walk farther, sleep better, and stand for longer periods of time.

"Those are important things," Jamison said. "If it goes well, we schedule them a date to go into the Operating Room."

After James Allen opted for the surgery at Walter Reed Bethesda in 2011, he said his chronic back pain significantly improved and he was able to decrease his pain narcotics, allowing him to be less groggy throughout the day.

The former commissioned intelligence officer, who retired in October 2011 after more than 21 years in the Navy, said he suffered chronic back pain due to peripheral nerve sheath tumors, which grow within or up against nerves. In April 2013, he received a newer model of the spinal cord stimulator, he said, which has offered even greater pain relief over a larger area of his back.

"This stimulator has helped considerably ... I would definitely recommend it to anybody who has constant back pain," Allen said. "The difference is incredible."

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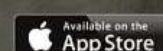
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# MUSEUM

Continued from 6

That hasn't changed too much even today. We market and promote our programs to the patient and caregiver population at the new Walter Reed and have seen folks make that short drive over here from Bethesda, either to tour our exhibits, participate in our special programs or have their children attend our kid-only events. So it was a great relationship in the past and it is still a great relationship today."

Throughout the museum you will find exhibits that compare historic medical advances to more contemporary medical advances – a veritable road map to how medical science has evolved to this day. One artifact of note is an Xbox 360 that is on display from Walter Reed, which showcases how modern technology is used to treat patients with traumatic brain injury (TBI).

"We have a fantastic exhibit on TBI, which is a very important issue for the military and an important exhibit for everybody actually," said Clarke. "It's an exhibit where we try to let people get some understanding about what's going on with the brain when it has any type of brain injury – what it looks like when it's injured and various types of injuries and the steps that are gone through to diagnose, treat and rehabilitate a brain that's suffered a TBI. [Another] exhibit on advances in military medicine gives the visitor a chance to understand the advances in re-

habilitation of soldiers, the protection of the service member in the field, the surgical repair and facial reconstruction. We also have an exhibit on the recent conflict – the war in Iraq – an Airforce hospital that was in place there from 2003 to 2007. We actually collected the floor of the trauma bay where the worst wounded were treated."

There is a lot to learn, see and do at the museum through interactive computer models, self guided tours and group tours guided by the professional staff at the museum.

"This is an interesting museum, we really have something for everybody," said Clarke. "The visitor here has a couple of opportunities [to learn from] some interactive [computer models]. There is an interactive [terminal] that allows you to scan through the human body and identify skeletal and anatomical parts and associate those with the right terms – a teaching tool. There is also an interactive [terminal] that allows the public to get a sense of what is not on display. The Museum's collection is 25 million objects, so we want to give the people that visit a glimpse of those things we can't currently find a home for in our exhibits and displays."

"Most of the museum's exhibits are self guided tours. We encourage all of our visitors to spend as much time as they like interacting with the exhibits that are on display. Groups can make a tour reservation in advance and can get a couple of different group tour options – one on forensics another on the human body. Those are tours that can be put together for young persons or persons of any age."

Matthew Brooks, a first time visitor to the museum, said his experience there was really

good and he was fascinated by all the specimens that were on display. He also learned a lot.

"I learned [the museum] started during the Civil War and just looking around I found out they had flying ICU's (intensive care units), which is pretty neat," said Brooks. "[One of the displays] also talked about patients that were suffering from pain, how they were able to block off the nerve so they don't feel pain in flight until they were able to get more intensive treatment. I didn't know they could do that, which is pretty awesome."

"For anyone interested in learning about modern medicine especially in relation to the military, this is a good place to do that."

"The visitor here will see exhibits on military medicine, on anatomy and physiology and Civil War medicine, but hopefully they will leave with an appreciation for what role military medicine has played in improving the health and well-being of everyone," said Clarke. "And why it's important for the military to maintain the health and the medical status of the active duty service member and their family."

The National Museum of Health and Medicine is open all week long, including weekends and holidays from 10:00 a.m. to 5:30 p.m. and is closed only on Christmas Day. For more information about the museum, upcoming exhibits or to schedule a tour, log on to the museum's Facebook page at [www.facebook.com/MedicalMuseum](http://www.facebook.com/MedicalMuseum).



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## STUDENTS

Continued from 1

pers. The two student Soldiers created a make-shift tourniquet using belts and towels and performed mental and physical evaluations.

When medical services arrived on the scene, Weymouth and Hunt continued their emergency treatment. "We got a couple of tourniquets on [Chavez] and told the paramedics what was going on," said Hunt. "In the aftermath, we all worked together as an effective team," added Weymouth.

The two student officers credit their studies for their actions.

"We had practiced for exactly this kind of scenario at USU," explained Weymouth. "We assessed the situation and our training kicked in."

According to police, Chavez was airlifted to the Maryland Shock Trauma Center in Baltimore for life threatening injuries. His status has improved from critical to serious condition.







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